



04-19-04

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23713 7590 02/17/2004

GREENLEE WINNER AND SULLIVAN P C
5370 MANHATTAN CIRCLE
SUITE 201
BOULDER, CO 80303

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Cathy Nelson	(Depositor's name)
<i>Cathy Nelson</i>	(Signature)
April 15, 2004	(Date)

EXPRESS MAIL # EV 437338089 US

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/435,403	11/05/1999	JOHN S. LOLLAR	88-98	5191

TITLE OF INVENTION: GLYCOSYLATED, LOW ANTIGENICITY LOW IMMUNOGENICITY FACTOR VIII

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	05/17/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SCHNIZER, HOLLY G	1653	435-069100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Greenlee, Winner and
2 Sullivan, P.C.
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Emory University

Atlanta, Georgia

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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- ☒ Issue Fee
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- ☒ Advance Order - # of Copies 10

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- ☒ A check in the amount of the fee(s) is enclosed.
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Hana Koo

April 15, 2004

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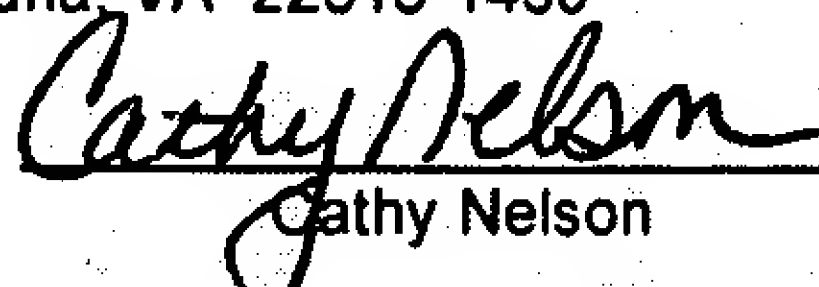


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/435,403
Applicant : Lollar
Filed : November 5, 1999
TC/A.U. : 1653
Examiner : Holly G. Schnizer
For : GLYCOSYLATED, LOW ANTIGENICITY,
LOW IMMUNOGENICITY FACTOR VIII
Docket No. : 88-98
Customer No.: 23713

Confirmation No. 5191

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April 15, 2004 Date	 Cathy Nelson
EV 437338089 US Express Mail Tracking Number	

TRANSMITTAL

Sir:

Included herewith are the following:

- Issue Fee Transmittal - Form PTOL-85 and
- Check in the amount of \$1,360.00 (\$1,330.00 for the issue fee and \$30.00 for 10 copies).

If the fee submitted is incorrect, please deduct any required fee from deposit account 07-1969.

Respectfully submitted,



Heeja Yoo-Warren
Reg. No. 45,495

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Attorney docket No. 88-98
April 15, 2004